

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Washington Davis

18cv3412

Write the full name of each plaintiff.

No. _____

(To be filled out by Clerk's Office)

-against-

Project Renewal/OMH-SHB
Paul Johnson; Lowell, NYC/Officer
Johan & Jane Doe 48th Precinct, Doctors
(OMH-1-3)

COMPLAINT

(Prisoner)

Do you want a jury trial?

☐ Yes ☒ No

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

2018 APR 18 PM 2:36

RECEIVED
SOUTHERN DISTRICT OF NEW YORK

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

ORIGINAL COURT COPY

I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

☒ Violation of my federal constitutional rights

☐ Other: FEDERAL INTEREST ARE AT STAKE AND WELL

II. PLAINTIFF INFORMATION

Each plaintiff must provide the following information. Attach additional pages if necessary.

Washington DAVIS
First Name Middle Initial Last Name

LIFE Allah
State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

Current Place of Detention

Institutional Address

County, City

State

Zip Code

III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

☐ Pretrial detainee

☐ Civilly committed detainee

☐ Immigration detainee

☐ Convicted and sentenced prisoner

☐ Other: _____

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:

PROJECT RENEWAL
 First Name Last Name Shield #
Is privately owned operating under CMH
 Current Job Title (or other identifying information)
491 Fletcher Place
 Current Work Address
491 Fletcher Place Bx, N.Y. 10457
 County, City State Zip Code

Defendant 2:

PAUL Johnson & Lowell
 First Name Last Name Shield #
Both work at 491 Fletcher Place Paul Director & Lowell
 Current Job Title (or other identifying information)
AS Supt. of Building
 Current Work Address
Bx N.Y. 10457
 County, City State Zip Code

Defendant 3:

John Doe Doctors 1-3 w
 First Name Last Name Shield #
Work at St. BARBOS Hospital CMH
 Current Job Title (or other identifying information)
AS pchiatrics
 Current Work Address
Bx N.Y. 10457
 County, City State Zip Code

Defendant 4:

NYC. Police Office 1-50
 First Name Last Name Shield #
are employed by C. ty of N.Y 100 Church St.
 Current Job Title (or other identifying information)
N/00 c N.Y
 Current Work Address
 County, City State Zip Code

V. STATEMENT OF CLAIM

Place(s) of occurrence: 491 Fletcher Place

Date(s) of occurrence: _____

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

THE FACTS OF ~~UPON~~ WHICH MY CLAIMS
ARE BASED HAS BEEN SET FORTH IN THE
ACCOMPANYING PAPERS
FOR EMERGENCY RELIEF AND
WHICH IS REITERATED AND REPEATED
HEREIN AS IF WRITTEN INTO
THE BODY OF THIS COMPLAINT.

SEE EMERGENCY MOTION ATTACHED.

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

Deprivation of Liberty, Cruel & Unusual Punishment, mental anguish, heart Damages, INJURIES to my throat, FRAUD, Petitioner has also Received operation on stomach immediately Following Heart Surgery.

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

As to the ~~Fraud~~ defendant City of NY. ~~is~~ has defrauded Plaintiff out of hundreds of millions of Dollars, in order to reveal this fraud the Plaintiff seeks an enforceable Declaratory Judgment to determine which of the two conflicting Dispositions is the Law of the Case. The Dismissal of the Charges in Criminal and the Conviction after the dismissal in Supreme Court; and Granting, All Relief sought in Accompanying Emergency Motion,

The plaintiff demands damages and injuries against Project Renewal/OMH in the sum of \$50.000.000 and damages and injuries against the City of New York, to be determined upon a declaratory judgment in my favor, plaintiff seek a sum of one million dollars from John & Jane Doe officers/48th precinct, whereas, the petitioner seeks the immediate return of my Holy Oil bless of God, and stolen by Director Paul, or the amount of one million dollars in the event it has been destroyed and the return of my \$15.000 also stolen by Paul.

The plaintiff has annexed hereto as Exhibit A to the Complaint, his medical records as proof of his two surgeries conducted at the St. Bardas Hospital.

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

<u>April 14/2018</u>		<u>Washington Davis</u>
Dated		Plaintiff's Signature
<u>Washington</u>	<u></u>	<u>Davis</u>
First Name	Middle Initial	Last Name

<u>Bx</u>		
Prison Address	<u>NIX</u>	<u>100157</u>
County, City	State	Zip Code

Date on which I am delivering this complaint to prison authorities for mailing: _____

MRN: 00911267
Visit: 1806200134
Age: 64y (08/09/1953)

DAVIS, WASHINGTON
Gender: Male

St Barnabas Hospital
Current Location: SBH
328-B 3North

Discharge/Care Transition - Interdisciplinary [Charted Location: SBH 328-B 3North]
[Date of Service: 03-08-2018 17:03, Authored: 03-08-2018 17:03]- for Visit: 1806200134,
Incomplete, Revised, Signed w/additional Signatures Pending, Available to Patient

EX. A

Thank you for allowing St. Barnabas Hospital to provide you with Excellent Care

Your Home Medications on discharge: This is a summary of your medication(s). If you find any difference between what is printed here and what you understand about your care, please tell us.

perphenazine 2 mg oral tablet: 1 tab(s) orally once a day (at bedtime)

mirtazapine 15 mg oral tablet: 1 tab(s) orally once a day (at bedtime)

ciaritin 10 mg oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

multiple vitamins with minerals oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
03/09/2018. Pharmacy Contact info : (718) 933-9900 .

lisinopril 2.5 mg oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

aspirin 81 mg oral tablet, chewable: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

clopidogrel 75 mg oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

metoprolol succinate 25 mg oral tablet, extended release: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

pantoprazole 40 mg oral delayed release tablet: 1 tab(s) orally every 12 hours x

Requested by: Cintron, Carlos (RN), 03-09-2018 13:23

Page 1 of 10

MRN: 00911267
 Visit: 1806200134
 Age: 64y (08/09/1953)

DAVIS, WASHINGTON
 Gender: Male

St Barnabas Hospital
 Current Location: SBH
 328-B 3North

30 days .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

acetaminophen 325 mg oral tablet: 1 tab(s) orally every 4 hours x 7 days, As
 Needed -Mild Pain (1-3) .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

rosuvastatin 40 mg oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

folic acid 1 mg oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

thiamine 100 mg oral tablet: 1 tab(s) orally once a day x 30 days .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

amoxicillin 500 mg oral tablet: 2 tab(s) orally 2 times a day x 14 days .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

clarithromycin 500 mg oral tablet: 1 tab(s) orally 2 times a day x 14 days .

This Prescription has been eprescribed to Total Care Pharmacy
 03/09/2018. Pharmacy Contact Info : (718) 933-9900 .

FOLLOW-UP/CLINIC VISITS:

Follow-Up/Clinic Visits 1:

• Follow-Up Visit Date 03/15/2018
 • Time 10:30 Am
 • Provider Dr. Gaduputi
 • Provider Contact Number 718-960-9000 Extension 1488
 • Service Gastroenterology
 • Location SBH Ambulatory Care Clinic 4487 Third Ave Bronx, NY 10457 (3Rd Floor)

Follow-Up/Clinic Visits 2:

• Follow-Up Visit Date 03/21/2018
 • Time 1:15 Pm
 • Provider Dr. Celaj
 • Provider Contact Number 718-960-9000 Extension 1682

Requested by: Cintron, Carlos (RN), 03-09-2018 13:23

Page 2 of 10

MRN: 00911267
 Visit: 1806200134
 Age: 64y (08/09/1953)

DAVIS, WASHINGTON
 Gender: Male

St Barnabas Hospital
 Current Location: SBH
 328-B 3North

- Service Cardiology ✓
- Location SBH Ambulatory Care Clinic 4487 Third Ave Bronx, NY 10457 (6Th Floor)

Follow-Up/Clinic Visits 3:

- Follow-Up Visit Date 04/13/2018
- Time 10:15 Am
- Provider Contact Number 718-960-9000 Extension 1487
- Service Transition ✓
- Location SBH Ambulatory Care Clinic 4487 Third Ave Bronx, NY 10457 (3Rd Floor)

To Reschedule Appointments:

- St Barnabas Ambulatory Care 718-960-6430/6433
- Union Community Health Center (2021 Grand Concourse) 718-220-2020
- Union Community Health Center (188th Street) 718-220-2020
- Union Community Health Center (Fordham Plaza) 718-220-2020
- Southern Medical Group 718-585-6100
- ALL OTHER QUESTIONS 718-960-9000

DISCHARGE PROBLEMS LIST:

Health Issues, Assessment and Plan:

1. ST elevation myocardial infarction (STEMI) (I21.3): Coding System: ICD-10-CM
2. Hepatitis C virus infection (B19.20): Coding System: ICD-10-CM

DISCHARGE NOTE:

Discharge Summary:

- Date of Admission: 03/03/2018
- Date of Discharge: 03/08/2018 17:04
- Primary Caregivers: self
- Primary Care Physician/Institution: none
- HPI: As per admitting team

64 yo M, PMH chronic smoker, chronic ETOH use, schizophrenia (no meds), (pt states he thinks he may have had a heart problem in past at SBH, old records showed EKG changes and admission but no evidence of MI) presented to the ED complaining of chest pain. Pt describes pain began after ingesting one bottle of wine eve of 3/1-- had >10 episodes of vomiting. Pt describes substernal chest pain/pressure, present at rest with mid epigastric/RUQ pain/burning. Did not take any medications. Pt was BIBEMS today. EKG showed ST segment elevations in II, III, AVF. STEMI alert called, pt went for emergent cath which revealed 100% RCA occlusion with successful PCI
 Admitting impression: STEMI (inferior wall MI)

• Hospital Course:

Brief hospital course: Pt was admitted to IMCU with impression of STEMI secondary to inferior

wall MI s/p emergent cath noted to have complete occlusion of ostial RCA s/p DES with coronary thrombectomy. Hospital course complicated by acute blood loss anemia likely due to Brilinta s/p EGD by GI on 03.06.2018 noted to have multiple non bleeding ulcers in distal body, large ulcer with dark hematin spot in the incisura, s/p multiple hemostatic clips and changed Brilinta to DAPT with ASA 81mg OD and plavix 75 mg OD with improvement in hemoglobin. During the hospital stay pt also had test positive for hep c (will follow up at GI as out pt). USG abdomen done showed fatty liver , no a/c changes noted. He also tested positive for H. pylori (stool antigen), will start him on triple therapy. will retest for H .pylori in 4weeks after completion of therapy.

Patient seen and examined at bedside. Patient in no acute distress, AOx3, talking in full sentences. PE unremarkable. Saturating 100% on room air. Medically stable at this time. Patient is informed about physician discharge plan, patient verbalized understanding and agreement. No other issues at this time necessitating inpatient stay. Pt cleared for discharge with follow up GI clinic/ cardiology clinic/transition clinic.

Final primary diagnosis: Inferior wall MI (s/p stenting), acute upper GI bleed (s/p endoscopy with hemostatic clip applied) and H.pylori infection

Discharge destination: Home
no

- Was patient Comfort Measures Only/ Hospice Care at the time of discharge?
- Patient Condition at Discharge
- Ambulatory Status During Discharge:
- Discharge Instructions

Fair
ambulatory without assistance
1.F/u with GI in 1 week (for GI bleed/HepC assessment) on 03/15/2018
2.F/u Dr.Cejal in 1 month
3 F/u at the transition clinic
4.Continue oral Abx for H.pylori for 2 weeks, to rpt H. pylori testing in 4weeks after completion of treatment
5.Continue Medications as prescribed
Patient was encouraged to be compliant with medication, to assist to follow up appointments as an outpatient for reassessment and optimization of medication, and in case symptoms get worse patient was advised to go to the nearest Emergency Room or call 911.
The patient agreed with the care and discharge

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 328-B 3North

plan. Discharge summary, outpatient follow up,
 instructions provided to patient and
 prescriptions sent online to preferred pharmacy.
 Appointments
 Medication compliance
 Dietary instructions
 Lifestyle modifications

• **Planning Goal**

Discharge Instructions:

- **Discharge Status** home
- **Primary Caregiver** self
- **Activity** activity as tolerated
- **ADL without Assistance** dressing, bathing, grooming, feeding
- **Diet Type** heart healthy

ALLERGIES:

Allergies:

- **Motrin:** Hives (Moderate)

IMMUNIZATIONS:

Immunization:

Charted Data:

Immunization:

- **Pneumococcal Vaccine:** Pneumococcal Vaccine, pneumococcal polysaccharide PPV23, Dose #: 1, Action Date/Time: 03-03-2018 22:05, Dose/Units: 0.5 milliLiter(s), IntraMuscular, Right Deltoid, Completed
- **Influenza:** Influenza, Fluarix/Fluzone quadrivalent, preservative free, Dose #: 1, Action Date/Time: 03-03-2018 22:04, Dose/Units: 0.5 milliLiter(s), IntraMuscular, Left Deltoid, Completed

Immunization Status:

- **Influenza Vaccine (September-March)** already vaccinated this season
- **Date of Vaccination** 03/03/2018
- **Pneumococcal Vaccine (all year)** already vaccinated (date)...
- **Date of Vaccination** 03/03/2018

MOST RECENT VITAL SIGNS:

Most Recent Vital Signs:

1. Vital Signs:

03-08-2018 22:00

Temperature (degrees F) (degrees F)	99.3
Temperature (degrees C) (degrees C)	37.3
Temperature Site Site	oral
Heart Rate (bpm) Heart Rate (bpm)	62
Heart Rate Method	device
BP Systolic (mm Hg) Systolic	111
BP Diastolic (mm Hg) Diastolic (mm Hg)	74
BP Mean (mm Hg) Mean (mm Hg)	86
Pt Position Pt Position	lying
Respiratory (breaths/min) (breaths/min)	20
O2 Delivery Patient On	room air

RESULTS:

General Radiology:

03-03-2018 16:49, XR Chest 1 View

Requested by: Cintron, Carlos (RN), 03-09-2018 13:23

MRN: 00911267
 Visit: 1806200134
 Age: 64y (08/09/1953)

DAVIS, WASHINGTON
 Gender: Male

St Barnabas Hospital
 Current Location: SBH
 328-B 3North

• **Planning Goal**

plan. Discharge summary, outpatient follow up,
 instructions provided to patient and
 prescriptions sent online to preferred pharmacy.
 Appointments
 Medication compliance
 Dietary instructions
 Lifestyle modifications

Discharge Instructions:

- **Discharge Status**
- **Primary Caregiver**
- **Activity**
- **ADL without Assistance**
- **Diet Type**

home
 self
 activity as tolerated
 dressing, bathing, grooming, feeding
 heart healthy

ALLERGIES:

Allergies:

- **Motrin:** Hives (Moderate)

IMMUNIZATIONS:

Immunization:

Charted Data:

Immunization:

- **Pneumococcal Vaccine:** Pneumococcal Vaccine, pneumococcal polysaccharide PPV23, Dose #: 1, Action Date/Time: 03-03-2018 22:05, Dose/Units: 0.5 milliLiter(s), IntraMuscular, Right Deltoid, Completed
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Immunization Status:

- **Influenza Vaccine (September-March)**
- **Date of Vaccination**
- **Pneumococcal Vaccine (all year)**
- **Date of Vaccination**

already vaccinated this season
 03/03/2018
 already vaccinated (date)...
 03/03/2018

MOST RECENT VITAL SIGNS:

Most Recent Vital Signs:

1. Vital Signs:

03-08-2018 22:00

Temperature (degrees F) (degrees F)
 Temperature (degrees C) (degrees C)
 Temperature Site Site
 Heart Rate (bpm) Heart Rate (bpm)
 Heart Rate Method
 BP Systolic (mm Hg) Systolic
 BP Diastolic (mm Hg) Diastolic (mm Hg)
 BP Mean (mm Hg) Mean (mm Hg)
 Pt Position Pt Position
 Respiratory (breaths/min) (breaths/min)
 O2 Delivery Patient On

99.3
 37.3
 oral
 62
 device
 111
 74
 86
 lying
 20
 room air

RESULTS:

General Radiology:

03-03-2018 16:49, XR Chest 1 View

Requested by: Cintron, Carlos (RN), 03-09-2018 13:23

MRN: 00911267
Visit: 1806200134
Age: 64y (08/09/1953)

DAVIS, WASHINGTON
Gender: Male

St Barnabas Hospital
Current Location: SBH
328-B 3North

• **XR Chest 1 View: EXAM-**

XR Chest, 1 View

EXAM DATE/TIME-

3/3/2018 4-49 PM

CLINICAL HISTORY-

64 years old, male^ Chest pain xr chest 1 view chest pain

attending doctor-

Avitabile nicholas admitting doctor- Avitabile nicholas patient

location- A

TECHNIQUE-

Frontal view of the chest.

COMPARISON-

CR - Chest 2014-12-07 16-08

FINDINGS-

Lungs- Large lung volumes, with an appearance concerning for COPD. Minor

right basilar scar. No focal pulmonary consolidation.

Pleural space- Unremarkable. No visualized pneumothorax.

Heart- Cardiac silhouette is borderline, accentuated by technique and larger

than on the prior exam.

Mediastinum- No acute findings.

Bones/joints- No acute findings.

Vasculature- Tortuous aorta.

Left supraclavicular radiopaque focus, presumed overlying artifact although

suggest clinical correlation.

IMPRESSION-

Large lung volumes, with an appearance concerning for COPD.

Additional findings, as above.

This report was electronically signed by-

Amy Hellbusch MD

3rd Mar, 2018 5-31-00PM EST

Transcriptionist- AMY HELLBUSCH, M.D.

Reading Physician- AMY HELLBUSCH, M.D.

Releasing Physician- AMY HELLBUSCH, M.D.

Released Date Time- 03/03/18 1733

2014^XR CHEST 1 VIEW^RAD 202818 AMY HELLBUSCH& M.D.&M.D. 202818 AMY
HELLBUSCH& M.D.&M.D.

2014^XR CHEST 1 VIEW^RAD 202818

Ultrasounds:

03-07-2018 20:42, US Abdominal Limited

• **US Abdominal Limited:** History- Hepatitis C.

Abdominal sonogram-

The liver is normal in size and demonstrates slightly increased echogenicity without focal masses. There is no dilatation of the intrahepatic biliary ducts. The portal vein is patent. The common bile duct is of normal caliber measuring 3.0 mm in diameter.

The gallbladder is normally distended. There is thickening of the wall up to 5.0 mm, may be related to chronic liver disease. There is no pericholecystic fluid. No gallstones are visualized.

The right kidney is normal in size measuring 10.5 cm longitudinal

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dimension. There is no hydronephrosis or kidney stones on the right.

There is a tiny cysts in the lower pole of the right kidney.

The visualized portion of the pancreas is unremarkable.

Impression-

Mild fatty infiltration of the liver. Thickening of the gallbladder wall, may be related to chronic liver disease. No gallstones. Tiny cysts in the lower pole of the right kidney.

Transcriptionist- IGOR FISHKIN, M.D.

Reading Physician- IGOR FISHKIN, M.D.

Releasing Physician- IGOR FISHKIN, M.D.

Released Date Time- 03/08/18 1250

4004^US ABDOMINAL LIMITED^RAD 203079 IGOR FISHKIN& M.D.&M.D. 203079

IGOR FISHKIN& M.D.&M.D.

4004^US ABDOMINAL LIMITED^RAD 203079

Diagnostic Cardiology:

03-04-2018 07:52, Echocardiogram

• **Echocardiogram:** Reason For Study- CHEST PAIN, UNSPECIFIED

Indications CP.

Billing TTE (Adult)- 93306.

Procedure The study quality is technically suboptimal.

Left Atrium Normal left atrial size.

Left Ventricle Normal left ventricular size. There is normal left ventricular wall thickness. Hypokinesis inferior wall.

Diastology Spectral Doppler of the mitral valve is reversed, with an E/A wave ratio < 1.0.

Right Atria Mild right atrial dilatation.

Right Ventricle Normal right ventricular size.

Aortic Valve Normal aortic valve.

Mitral Valve Normal mitral valve.

Tricuspid Valve Normal appearing tricuspid valve leaflets. Right ventricular systolic pressure is estimated at 21mmHg.

Pulmonic Valve Pulmonic valve not well visualized.

Arteries Normal sized aortic root.

Pericardium No pericardial effusion.

Interpretation Summary

Hypokinesis inferior wall

The study quality is technically suboptimal

MMode/2D Measurements and Calculations

IVSd- 1.00 cm

IVSs- 1.2 cm

LVIDd- 4.0 cm

LVIDs- 3.5 cm

LVPWd- 0.91 cm

LVPWs- 1.5 cm

FS- 12.7 %

Ao root diam- 3.2 cm

% IVS thick- 21.4 %

LA dimension- 3.0 cm

LVLs ap4- 6.4 cm

ESV(MOD-sp4)-37.0 ml

EF(MOD-sp4)- 42.0 %SV

(MOD-sp4)- 26.8 ml

LA ESV (BP)- 31.0 ml

LA ESV Index BP- 18.7 ml/m2

Doppler Measurements and Calculations

MV E max vel- 36.4 cm/sec

MRN: 00911267
 Visit: 1806200134
 Age: 64y (08/09/1953)

DAVIS, WASHINGTON
 Gender: Male

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MV A max vel- 58.7 cm/sec
 MV E/A- 0.62
 TR max vel- 164.2 cm/sec
 Ao V2 max- 96.4 cm/sec TR max PG- 10.8 mmHg
 Ao max PG- 3.7 mmHg RVSP(TR)- 20.8 mmHg
 RAP systole- 10.0 mmHg
 Transcriptionist- RUBIN SILVERMAN, M.D.
 Reading Physician- RUBIN SILVERMAN, M.D.
 Releasing Physician- RUBIN SILVERMAN, M.D.
 Released Date Time- 03/04/18 1556

8700^CP ECHOCARDIOGRAM^RAD 1080 RUBIN SILVERMAN& M.D.&M.D. 1080
 RUBIN SILVERMAN& M.D.&M.D.
 8700^CP ECHOCARDIOGRAM^RAD 1080

General Chemistry:

03-08-2018 05:58

Albumin.	↓ 2.5
Alkaline Phosphatase..	↓ 32
ALT/SGPT.	↑ 97
AST/SGOT.	↑ 99
Bilirubin Total.	0.6
Calcium.	↓ 8.0
Carbon Dioxide.	29
Chloride.	108
Creatinine.	0.9
Glucose.	82
Magnesium.	1.7
Phosphorous, Inorganic.	2.7
Potassium.	5.1
Protein Total.	↓ 5.4
Sodium.	141
Urea Nitrogen.	8
GFR	>60

General Hematology:

03-08-2018 05:58

Basophil (%).	0.2
Basophil (10^3).	0.01
Eosinophil (%).	1.7
Eosinophil (10).	0.08
Hct (%).	↓ 33.1
Hgb (gm/dl).	↓ 11.0
Immature Granulocyte (%).	0.0
Immature Granulocyte (10^3).	0.00
Lymphocyte (%).	↑ 58.7
Lymphocyte (10).	2.70
MCH (pg).	30.1
MCHC (gm/dl).	33.2
MCV (f1).	90.4
Monocyte (%).	↑ 13.3
Monocyte (10^3).	0.61
MPV (f1).	9.9
Neutrophil (%).	↓ 26.1

Requested by: Cintron, Carlos (RN), 03-09-2018 13:23

MRN: 00911267 Visit: 1806200134 Age: 64y (08/09/1953)	DAVIS, WASHINGTON Gender: Male	St Barnabas Hospital Current Location: SBH 328-B 3North
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Neutrophil (10).	↓ 1.20
NRBC (/100 WB).	0.0
Platelet Count..	174
RBC (10 ⁶ /uL).	↓ 3.66
RDW (%).	12.3
WBC (10 ³ /uL).	4.6

HIV Test Result:

- HIV Test Result This is a confidential result of your test.
HIV Test Result: Negative

Pending Test Results:

TEST NAME	STATUS	DATE/TIME
HCV RT-PCR, QUANT (NON-GRAPH) (LC)	Specimen Received by Performing Department	03/07/2018 10:42
HBV REAL-TIME PCR, QUANT (LC)	Specimen Received by Performing Department	03/07/2018 10:58

NURSING DISCHARGE INSTRUCTIONS/CHECKLIST:**Functional/Cognitive Status:****Functional/Cognitive Status:**

- Hearing Status normal hearing
- Vision Status normal vision
- Cognition Status normal cognition
- Ambulation normal ambulation
- Activities of Daily Living normal ADLs
- Independent Activities no difficulties doing errands alone

Discharge Education:

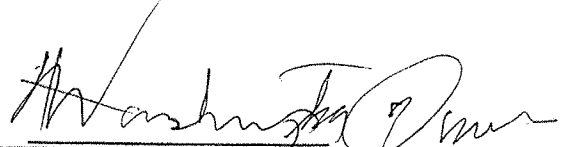
- Has the patient designated a caregiver? No ⁽¹⁾
- No caregiver designated because Pt does not believe it is necessary to identify a caregiver ⁽¹⁾
- Has the family/caregiver been notified of discharge to home or other facility? No
- Family/Caregiver not notified because Not available
- Discharge instructions and education given to Patient
- Teachback performed Yes
- Education provided related to Medication management Lifestyle modification

Electronic Patient Signature:

- Signee Patient

Patient/ Guardian Signature:

- Patient Signature - I understand the discharge instructions Signature(s) that have been explained to me



MRN: 00911267
Visit: 1806200134
Age: 64y (08/09/1953)

DAVIS, WASHINGTON
Gender: Male

St Barnabas Hospital
Current Location: SBH
328-B 3North

Electronic Signatures:

Basarahalli, Vijaya (MD/Resident) (Signed 03-09-2018 13:02)

Authored: FINAL MEDICATIONS LIST

Cintron, Carlos (RN) (Signed 03-09-2018 13:23)

Authored: FINAL MEDICATIONS LIST, RESULTS, NURSING DISCHARGE INSTRUCTIONS/CHECKLIST, Patient Signature

Culas, Roshni (MD/Resident) (Signed 03-09-2018 13:05)

Entered: FINAL MEDICATIONS LIST, FOLLOW-UP/CLINIC VISITS, DISCHARGE PROBLEMS LIST, DISCHARGE NOTE, ALLERGIES, IMMUNIZATIONS, MOST RECENT VITAL SIGNS, RESULTS, NURSING DISCHARGE INSTRUCTIONS/CHECKLIST, Patient Signature

Authored: FINAL MEDICATIONS LIST, FOLLOW-UP/CLINIC VISITS, DISCHARGE PROBLEMS LIST, DISCHARGE NOTE, IMMUNIZATIONS, MOST RECENT VITAL SIGNS, RESULTS, NURSING DISCHARGE INSTRUCTIONS/CHECKLIST, Patient Signature

Rosario, Ingrid (Unit Clerk) (Signed 03-09-2018 11:54)

Authored: FOLLOW-UP/CLINIC VISITS

Singasani, Rakesh (MD/Attending) (Signature Pending)

Co-Signer: FINAL MEDICATIONS LIST, FOLLOW-UP/CLINIC VISITS, DISCHARGE PROBLEMS LIST, DISCHARGE NOTE, IMMUNIZATIONS, RESULTS, NURSING DISCHARGE INSTRUCTIONS/CHECKLIST, Patient Signature

Last Updated: 03-09-2018 13:23 by Cintron, Carlos (RN)

References:

1. Data Referenced From "Admission Profile" 3/3/2018 7:10 PM

The Petitioner, standing in the shoes of many, by this, reiterates and repeats, as if written into the body of this Declaration, all matters appearing in the annexed OSC and Verified Petition and incorporated herein by reference thereto as Exhibit A.

PROJECT RENEWAL/OMH

Moreover, the Building 491 Fletcher Place/Project Renewal is privately owned and existing under color of OMH; and further, the defendant has made representations to city, state and federal agencies, that it would not only provide safe housing to its clients as required by law but would be providing essential services to its mentally disabled clients, including but not limited to Safe Supportive Housing (e.g.: making sure that clients have the necessary skills to live on their own and to then move them into permanent housing within a year, enter alia, and have thereby gained access to many of their clients SSI moneys in the capacity of the clients' Payee).

RES ISPA LOQUITUR

The Verified Petition (hereinafter, "VP"), p. 2, par. C, sub. 5, 6 and 7, has set forth facts that if true, both the construction company involved in the actual construction of 491 Fletcher Place on January 3, 2012, and who willfully aided and abetted owner in creating this clearly hazardous, tortuous and unsafe condition that the petitioner(s) has been willfully subjected to by the defendants herein, are clearly liable to this petitioner and others that have sustained damages and injuries by reason of the defendants wanton and willfully endeavor to effectuate harm to the petitioner by placing him in a conspicuously unsafe and unlivable Housing.

The fact that while construction of 491 Fletcher Place/OMH was yet underway at the time the petitioner became a tenant therein, gives rise to a conclusive presumption in law that the defendant's acts and omissions were calculated to inflict upon this petitioner and others, serious pain and suffering.

This is self-evident by both the NYC and NYS Building Codes enacted to secure to all citizens safe and livable housing. The Building Code Section 28-301.1, owner's responsibilities, provides:

"All buildings and all parts thereof and all other structures shall be maintained in a safe condition. All service equipment, means of egress, materials, devices, and safeguards that are required in a building by the provisions of this code, the 1968 building code or other applicable laws or rules, or that were required by law when the building was erected, altered, or repaired, shall be maintained in good working condition."

Correspondingly, this gives rise to the question as to how the defendants acquired the mandatory "Certificate of Occupancy" while the Building was yet in the process of being completed and where the mandatory "Final Inspection" that precedes the issuance of such certificate-- and which occurs only after all work on the Building has been completed-- had yet to be conducted by inspectors.

"In New York City, for a building to obtain a certificate of occupancy, the structure must pass a series of inspections, as well as a walk-through from the Department of Buildings. In most cases, the inspections include, but are not limited to, plumbing inspections, fire sprinkler system inspections, fire alarm system inspections, electrical inspections, fire pump pressure tests, architectural inspections (where inspector checks if building was built in accordance with an architect's stamped and approved drawings), elevator inspections, completion of lobby, and an inspection to see if the building complies with the proper number of entrances required for its size.^[3] After all inspections are passed, the last step is generally to have a walk-through by a member of the Department of Buildings, who sees that there is no major construction remaining on the job site, that there are no obstructions to the entrances, that there are no safety hazards in the building, and that everything in the building was built according to plan. If the inspector approves his walk-through, a certificate of occupancy is usually granted.

The fact that the petitioner was moved into an apartment Building under actual construction, and therefore, impermissible for want of the mandatory "Final Inspection" crucial to obtaining the "Certificate of Occupancy" required by law, establishes, as a matter of law, the fact that this Building is both unsafe and unlivable. And so, and as this court shall see, that this is not a coincident that OMH is involved in this matter, but rather, part of a pattern, speaking from the Jim Crow rule, that a Blackman has no rights that a Whiteman ought to respect, employed by these defendants against me to this day.

The VP (P.p. 2 - 8) alleges that ensuing the petitioner's occupancy at Fletcher Place, not only did he sustained his first heart attacked, but that three people have died in this Building, and another clients here has informed me that she too has developed illnesses that she did not have until after she became a tenant here. Finally, the petitioner, on 3/3/18, sustained a second and most severe heart attack, necessitating immediate heart surgery, wherefore, it is Res Ipsa Loquitur.

THE PATTERN:

The Verified Petition avers, enter alia, that the defendants acts and omissions leading up to the petitioner second heart attack were calculated with the intent to induce me into a fatal heart attack intend to effectuate my death/conspiracy murder.

P R O O F:

To understanding the petitioner claim here, it is inevitable that we go into the controversy between the petitioner and the City of New York on July 17, 1984, in which his causes of action for False Arrest, False Imprisonment and Malicious Prosecution first accrued.

On July 17, 1984, the petitioners' causes of action against the City of New York for false arrest, false imprisonment and malicious prosecution accrued. In that, the crime of second degree robbery had not only been rejected by the grand jury on February 23, 1984, but the matter was returned to the local criminal court of original jurisdiction over such felony complaint, consolidated under Crim. Ct. Docket #4X006725 and dismissed as being "jurisdictionally defective on its face."

THE LAW OF THE CASE

The People took no appeal from Justice Grey's order dismissing the complaint as being jurisdictionally defective on its face, and therefore, as a matter of law, this competent order of dismissal became the Law of the Case upon the Peoples failure to take a timely appeal therefrom. In support of this claim, the petitioner annexes hereto as Exhibit B, the official Court Record Card in which the matter is documented.

PATTERN

Notwithstanding the binding order of Justice Grey which barred all other courts from conduct any further proceedings in this matter, for want of jurisdiction, and which also deprived the warden of authority to maintain the custody of the petitioner, the Department of Correctional Services for both the City and State of New York aided by various state supreme court justices and OMH concocted under color of law, a scheme to defraud both the petitioner and the United States Government with respect to my claims via mail and wire fraud.

Pursuant to the actions which accrued here, a total of six notices of claim were filed by me with the Comptroller of the City of New York as required by law (see annexed Exhibit C). The sums demand*by way of such claims were sought with cost and interest upon hundreds of millions of dollars and which, by reason of the City's default upon them all, has increased the City's debt to this petitioner and citizen-class to now trillions of dollars; and pure "motive" for the City's scheme to defraud the petitioner and others out of the moneys due and owing.

Moreover, additional motive emerges from the fact that the grounds upon which my notices of claim are predicated (Want of Jurisdiction), is sacred ground controlled by organized-crime, and wherewith, all manners of corruption be hide.

*claim May 12, 1984, \$50.000.000 plus punitive damages \$50.000.000, claim June 8, 1984, \$50.000.000 plus \$10.000.000 per each day of his false imprison and \$100.000.000, punitively, claim June 24, 1984, \$500.000.000 for the loss of over 1000 songs written by me for my career as a songwriter, claim October 13, 1984, \$50.000.000, punitively, \$50.000.000, claim October 24, 1984, \$300.000.000, punitively, \$50.000.000 and Class Action claim October 30, 1984, \$666.000.000, punitively, \$100.000.000. Filed numbers T 427108 and T 429719 were assigned to these notices of claim by that office.

It is here, where the face of organized crime shows itself, for here, on August 1, 1984, the petitioner filed a pretrial Writ of Habeas Corpus pursuant to Article 70 of the CPLR sounding in Coram Non Judge (see Exhibit B).

As a matter of fundamental law, once a defendant has demanded a pretrial Writ of Habeas Corpus, a trial is absolutely barred until the Writ has been disposed of according to law.

Pattern:

The official court record (Ex. B) proves beyond a reasonable doubt that during the actual pendency of the Writ, trial proceedings against the petitioner were simultaneously undertaken by a judge (George D. Covington) other than the actual trial judge (Collin J.) presiding over this matter.

It is noteworthy, that this petition for the Writ was unopposed and therefore, giving rise to a reasonable inference in law that the facts, as alleged by the petitioner were true.

Moreover, a second reasonable inference emerges here; which is, that the City of New York has links to organized crime, for this is not a product of an appealable trial court error that has transpired here, but a matter which involves a deliberate abuse of the process to invent, contrary to all manner of law, a second final disposition/malicious lie operating to cover up and conceal the material fact that the prisoner's imprisonment constituted the crimes of kidnapping within the meaning of Penal Law sec. 135.20-25 and also made criminal under Title 18 USC 241, 242 and 371, and further, the fact that the defendants in order to perfect the scheme to defraud, used the United States Postal Services and electronic devices to circulate this disinformation, is material evidence of Mail and Wire under Title 18 USC 1341 and 1343, inter alia.

Here, the City set up a trial judge (Covington), where there ought not to have been a judge, at least not until the writ had been resolved according to law, whose job was to brainwash the petitioner into a belief that I had no causes of action sounding in malicious prosecution, enter alia, by conducting a fictitious trial and securing a purported judgment of conviction that in the furtherance and commission of the crimes herein mentioned, that would operate to cover up and conceal the material fact that this matter concluded in favor by a binding order of dismissal, and who would lay the foundation for the plan to effectuate my death by means of strangulation and then fraudulently document the crime as a suicide by hanging once coconspirators/ sleeping –cells located within OMH and The NYS Dept. of Corr. Serv./ Clinton Correctional Facility had secured my unlawful imprisonment herein.

The proof here is that (1) the trial court had to have known that he was acting without jurisdiction by reason of the (2) binding Order of Justice Grey and (3) the fact that the Writ was pending a disposition, and (4) the fact that after procuring this illegal conviction, and without my need therefor, he immediately issued an order placing me on a "Suicide Watch." But this, as it turns out, was nothing more than a fictitious record being created against the petitioner to cover up the crime of murder that would follow once coconspirators within OMH and the NYS Dept. Of Corr. Serv. had obtained the unlawful custody of the petitioner.

The petitioner, was sentenced to 15 yrs. to life, and within a week of his unlawful detention by the NYS Dept. of Corr. Serv., was committed to the Marcy Psychiatric Institution For the Criminally Insane/OMH, under the false pretense that I had attempted to commit suicide-- and what a coincidence—. However, on the date of my discharge, on or about January 3, 1984, without cause and in a secret room for prisoner searches, I was attacked by the two transporting officers, C.O. Cube held my neck while his partner held both my arms as they both proceeding to cause my death by strangulation.

It was as if I had an outer body experience and that Life itself sustained me, and thus barring their sting death. In fact, I offered no resistance to their assault and when they had finally realized that I refused to die, they gave up and released me and I immediately began coughing up blood. OMH and the medical department at the Clinton Correctional Facility engaged in a cover up that including denying medical attention to me in order to silence the record.

Calling the thing what is, had coconspirators succeeded in my murder, my dead body was to be transported to the Clinton Correctional Facility and hung in a cell [the KKK method]. But my life is my own and no man takes my life without the approval of my God, for I am the truth, and just as a lie has its time, so too, is there a time for truth. My truth is of God, for it is he who has bought me through this great tribulation and has set me in a sure place, and has given me strength and plentiful days of life to insure that his day of truth comes to pass in this matter.

As for me, I am a sign from him (God) bearing a message for the wicked; that your malicious lies shall be your ruin.

Returning to the moment, the fact that I actual experienced this attempt to take my life, if I were in doubt about my legal claims, that doubt was removed, for if my claims were frivolous, why in the world did defendants attempt to murder me.

Moreover, the petitioner has filed a complainant with the FBI related to all the criminal matters sounding herein, my first complainant was "kicked to the squad" (which is all the information that I can provide at this juncture because active investigations are underway) and my complainant dated April 4th, 2018, has also been kicked to the Squad. The first page of that complainant is annexed hereto as Exhibit D.

Despite the many years that have elapse in this matter and after the smoke has clear, the simple question left unanswered by the judiciary process is the plain dispute of fact appearing on the face of the Court Record Card (Ex. B), to wit: (1) The final and binding order render by a court (Judge Grey) of competent jurisdiction dismissing all charges against me on July 17, 1984, and (2) the judgment of conviction for the identical charges rendered on November 11, 1984.

PETITIONER MOVES THIS COURT FOR AN ENFORCEABLE DECLARATORY JUDGMENT OPERATING TO DETERMINE WHICH OF THE TWO CONFLICTING DISPOSITION ON THE IDENTICAL OFFENSE IS CONSTITUTIONAL AND THE LAW OF THE CASE?

Since the petitioner's claim is based upon a "want of jurisdiction," and as such, can be raised at any time and in any court provide that the party is properly before the court, petitioner seek to have this long outstanding dispute of fact resolved in this Court by way of an Enforceable Declaratory Judgment.

WHEREFORE, petitioner prays that the court grant the relief sought by way of a Declaratory Judgment, and for such other and further relief seeming just and proper.

As can be seen from the allegation aforesaid, the defendant OMH is not a new comer in this matter, but rather, a long active conspirator who has abused the processes of its agency to concocted a fictitious psychological profile on the petitioner to discredit me and have caused this false information to be circulate by mail and wire in this scheme to defraud the petitioner and the United States Government with respect to claims; in addition, it willfully aided in the 1984 attempt on my life.

So this inhumane treatment of petitioner set forth in the body of the VP is nothing new to me but part of the pattern created by conspirators within the N.Y.S. Dept. of Corr. Serv. an is associated with the practices of brainwashing and behavior modification that I have been subjected to against my will and consent.

The mystery behind my subjective to the jackhammer noises alleged in the VP, p. 2, par. 7, is this: At each correctional facility in which I was confined, conspirators would go behind my cell and pang immediately following my transfer to that facility. This practice began during my pretrial detention where, ensuing each of my court returns to The Bronx House of Detention, my captive would go behind my cell and bang, this operated to install an unusual fear into me because its deliberate repetition had come to mean that my stoker was here.

That stoker, as I now know, is one Cleveland who was involved in my kidnapping at the Bronx House of Detention in 1984, and was recently operating out of my Building under color of an employee.

Finally, with respect to my OSC file in state court (Ex. A). A long standing doctrine in our federal court system is this, that when so ever a State withholds a remedy that it has from a citizen, then it is the duty of the federal court to provided it.

On March 23rd, 2018, the petitioner filed his OSC seeking, enter alia, temporary restraining order to enjoin the defendants NYPD/48th Precinct, Project Renewal/OMH-SBH, their agents and those in active concert with defendant Project Renewal/OMH, from what amounted to a campaign of harassment intent to induce the petitioner into another heart attack (see Ex. B).

This OSC/TRO was commenced in the Bronx Supreme Court and Index number 260047/18 was assigned to this matter, I was informed that I would receive a response from the Court within three days. After three days had pass I returned to the clerk's office to inquire because no response had been issue by the court on this emergency application, meanwhile, the defendants were repeatedly abusing the process to subject me to the deprivation of my constitutional right to liberty afford all citizens under the Due Process Clause of our United States Constitution, under the false pretense OMH, against my will and needs and with the threat of use of force by NYPD. I was then given a court phone number out of service by the clerk's office and told to call it the follow day. I later discovered that my OSC/TRO application in Bronx Supreme Court mysteriously vanished from the court records.

Realizing-- that after the elapse of some 8 days without a response from the court on this emergency motion-- that this state court had deliberately withheld from me, this available state court remedy, the petitioner then sought the same relief in New York Supreme Court under Index number 100466/18. A copy of the court's order declining my petition is annexed hereto as Exhibit E.

Moreover, the State and City has wantonly and willfully subjected the petitioner to of his constitutional right to the equal protection of the law, when, following the burglary of my apartment in which \$15.000 was taken along with my Holy Oil by staff, officers from the 48th Precinct willfully refused to process and investigated my complainant about this incident on two separate occasions which I called in via 911, the first, immediately after I was released from SBH-OMH on or about the 12th day of March, 2018, when I discovered the crime and the second on or about 15th day of March, 2018. Therefore, the petitioner was compelled to bring this matter to the attention of the FBI via complainant (Ex. D).

CONCLUSION

The petitioner has a constitutional right under the United States Constitutional and Law as well as under the N.Y. Constitution and law not to be deprived of his liberty but upon the due process of law, the defendants have, under color of mental health commitments against my will, need and consent, wantonly and willfully subjected the petitioner to the deprivation of his right to liberty and will continue to do so unless enjoined by this court, and further, the petitioner has a constitutional right not to be subject to cruel and unusual punishment and to feel secure in his home and person and to a safe and livable dwelling free from harassment, vexation and conduct intended to interfere with the petitioner's recovery from major heart surgery, the state courts have refused to afford the petitioner the available remedies which he is entitled to under the circumstances of this case and has left the petitioner in a worst condition than the former because instead of the petitioner being focus on his immediate medical needs linked to his heart surgery, they have intentionally kept me preoccupied with a mater that human dignity would alone require a court to intervene because threat of irreparable harm was so obvious.

Right now, the petitioner is out of all my heart mediation and blood has resurfaced in my stool, in addition, I have been made to missed my follow doctor appointments and now in need of time to reschedule said appointment to obtain a prescription to refill my necessary heart medication.

Finally, the petitioner is due in Housing Court for a trial on the defendant Project Renewal's eviction petition. See Exhibit F annexed hereto.

WANT OF JURISDICTION

An eviction proceeding brought by the owner of a Building in which the owner failed to obtain a mandatory "Certificate of Occupancy" has no cause or controversy suitable for a redress in Housing Court because the intent of the enactment of that proceeding was intended to provide a remedy to Building owners that have lawfully obtained a "Certificate of Occupancy" from the constituted authority and not to an owner who is illegally operate the property for want of a certificate of occupancy so to do.

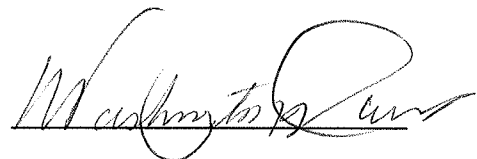
Under these circumstances, it is the petitioner/victim who holds the cause or controversy in the matter.

Therefore, and as a matter of law, the action commenced by defendant Project Renewal in Housing Court is frivolous on its face and misconduct warranting severe sanction, and though I have stated my position herein in Housing Court, the matter is schedule for trial.

It follows, that the pleadings being frivolous, is tantamount to a want of jurisdiction, an as such, can be raised before this Court at this time.

WHEREFORE, the petitioner prays that this Court grand the relief sought and for such other and further relief seeming just and proper to this Court.

Executed on ^{April}~~March~~ 14, 2018



Petitioner

491 Fletcher Place (Apt. A46)
Bronx, New York 10457
Cell: (917) 302-9867